

Trauma Clinical Guideline: Major Pelvic Fracture

The Trauma Service Directors' Workgroup is an open forum for the directors of designated trauma services in Washington State to share ideas and concerns regarding the provision of trauma care. The workgroup meets twice a year to encourage communication between services so that they may share information and improve the quality of care that they provide to patients. On occasion, at the request of the Governor's Steering Committee on EMS and Trauma Care, the group discusses the value of specific guidelines for trauma care procedures.

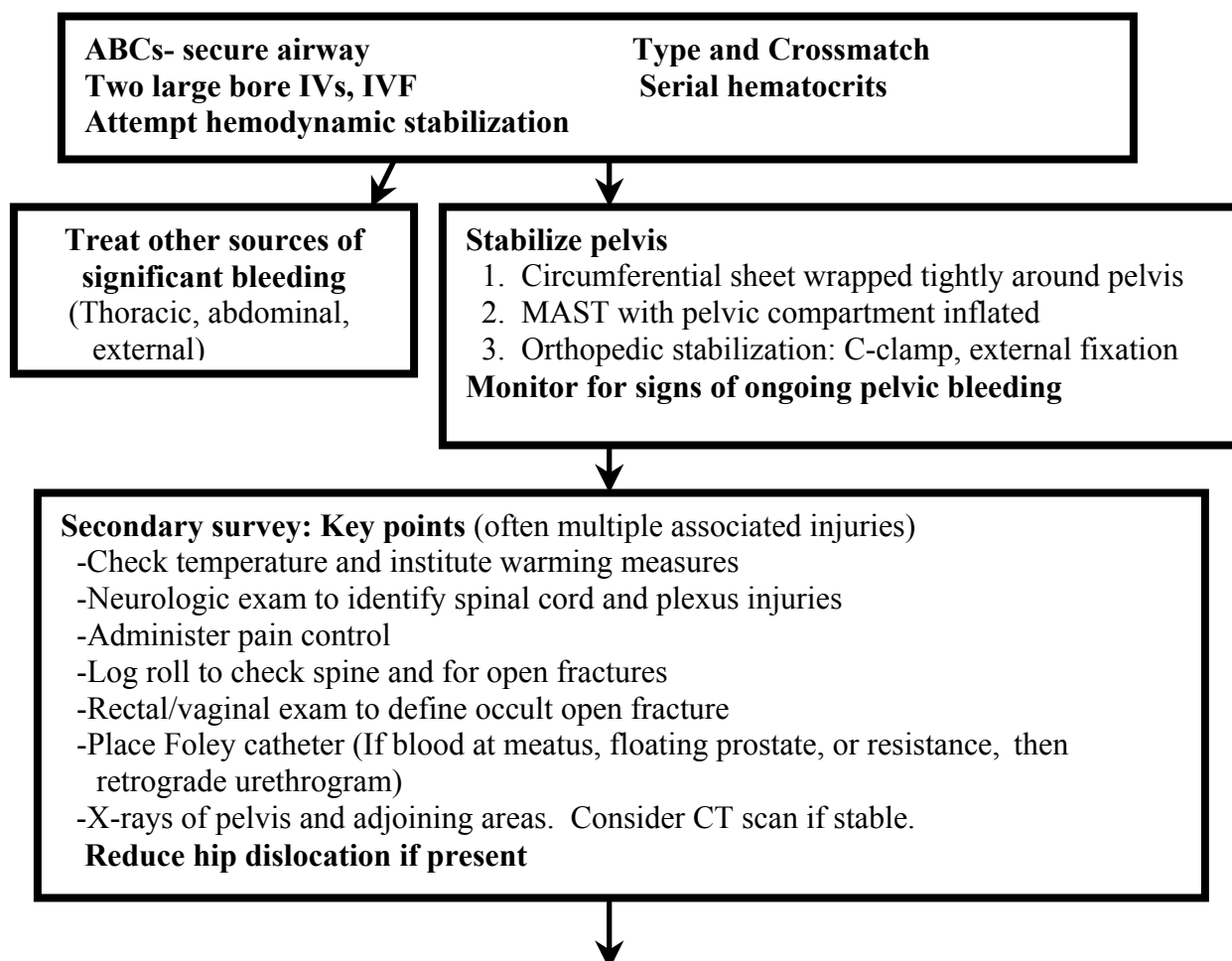
This guideline is distributed by the Washington State Department of Health on behalf of the Governor-Appointed Steering Committee on Emergency Medical Services and Trauma Care to assist trauma care services with the development of their trauma patient care guidelines. Toward this goal the Trauma Service Directors have categorized the type of guideline, the sponsoring organization, how it was developed, and whether it has been tested or validated. It is hoped that this information will assist the physician in evaluating the content of this guideline and its potential benefits for their practice or any particular patient.

The Department of Health does not mandate the use of this guideline. The Department recognizes the varying resources of different services and that approaches that work for one trauma service may not be suitable for others. The decision to use this guideline in any particular situation always depends on the independent medical judgment of the physician. It is recommended that trauma services and physicians that choose to use this guideline consult with the Department or Washington State's North Region Trauma Quality Improvement Committee, the original developer of the guideline, on a regular basis for any updates to its content. The Department appreciates receiving any information regarding practitioners' experiences with this guideline. Please direct comments to Mary Rotert RN, (360) 705-6729 or mary.rotert@doh.wa.gov

This is a trauma assessment, management and transfer guideline. It was adapted from a guideline developed by Washington State's North regional trauma quality improvement committee. The Trauma Medical Directors Workgroup reviewed the guideline, sought input from trauma care physicians throughout Washington State, and used that input to make the changes. The guideline was then endorsed by the Steering Committee, and by the DOH Office of EM/TP. This guideline has not been tested or validated. Further information is available at the address listed.

Major Pelvic Fracture Guideline

Initial Management & Resuscitation



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Preparing for Transfer

Physician

1. Determine choice of ground vs. air transport based on clinical status & distance
2. Maintain spine precautions and pelvic stabilization
3. Send type and crossed blood with patient (if indicated & adequate time)

Nurse

1. Review physician maneuvers to confirm proper application
2. Monitor vital signs closely
3. Secure IV access sites for transfer
4. Check distal pulses, perfusion
5. Further stabilize pelvic girdle with pillows & blankets
6. Copy and send all records & X-rays

Sources of treatable blood loss from non-pelvic sites should be controlled prior to transfer if at all possible

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